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76058

7590

03/21/2008

**YAHOO! INC. C/O GREENBERG TRAURIG, LLP**  
**MET LIFE BUILDING**  
**200 PARK AVENUE**  
**NEW YORK, NY 10166**

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Shoba Jagtia-Grujton	(Depositor's name)
	(Signature)
June 18, 2008	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO	CONFIRMATION NO
09/717,822	11/20/2000	Eron A. Jokipii	085804-020100	2085

TITLE OF INVENTION: MULTI-LANGUAGE SYSTEM FOR ONLINE COMMUNICATIONS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1440	\$0	\$0	\$1440	06/23/2008

EXAMINER	ART UNIT	CLASS-SUBCLASS
ALBERTALLI, BRIAN LOUIS	2626	704-270100

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  
 Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
 "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.
2. For printing on the patent front page, list  
 (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.
- 1 Greenberg Traurig, LLP  
 2 James J. DeCarlo  
 3 \_\_\_\_\_

## 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE  
 YAHOO! INC.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

SUNNYVALE, CA

Please check the appropriate assignee category or categories (will not be printed on the patent):  Individual  Corporation or other private group entity  Government

- 4a. The following fee(s) are submitted:  
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 A check is enclosed.  
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 The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-1561 (enclose an extra copy of this form).

## 5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Date June 18, 2008

Typed or printed name James J. DeCarlo

Registration No. 36,120

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